STATE OF INDIANA DEPARTMENT OF ADMINISTRATION PUBLIC WORKS DIVISION MINORITY BUSINESS ENTERPRISE PROGRAM

## MBE SUBCONTRACTOR PLAN

PROJECT #_ PROJECT NAME		_	BID DATE	_//
BIDDER_ADDRESS_CITY/STATE/ZIP_PHONE()				
The following maccording to the	inority owned : e following sc	firms will be su	abcontracting on	the project
<u>MBE</u>	PHONE	<u>CONTACT</u>	TRADE	AMOUNT

THIS DOCUMENT MUST BE INCLUDED IN YOUR SEALED BID PACKAGE

DAPW 26SUP2 Rev. 6/91

## APPLICATION FOR MBE PROGRAM WAIVER

Application for MBE Program Waiver is hereby submitted for the listed below.	
Date of Application// Project #Project Name	
Bidder Address City/State/Zip Phone ( )	
Please indicate reason(s) for application below:  Unable to locate MBE engaged in  (trade)  Unable to secure competitive price in  (trade)  Other (see attached description)	· ·
Please indicte MBE firms contacted below:	
MBE Type of Attempt Date(s) Attempted	<u>Results</u>
Applicant Signature Date	_ /

Date

<u>THIS DOCUMENT MUST BE INCLUDED IN YOUR SEALED BID PACKAGE</u>